

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼	
		<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			
		<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2016 </div>	

Full Name of Payee The Prosper Group Corporation			Date of Public Distribution/Dissemination		
Mailing Address 435 East Main Street Suite 250			<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016 </div>		
City State Zip Code Greenwood IN 46143			Amount		
Purpose of Expenditure Media placement			<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> 50000.00 </div>		
Category/Type <div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">004</div>			Transaction ID : 001		
Name of Federal Candidate Eggman, Michael, ,			Date of Disbursement or Obligation		
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> 50000.00 </div>			2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Honold Communications			Date of Public Distribution/Dissemination		
Mailing Address 252 9th Street NE			<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016 </div>		
City State Zip Code Washington DC 20002			Amount		
Purpose of Expenditure Media production			<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> 17432.48 </div>		
Category/Type <div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">004</div>			Transaction ID : 002		
Name of Federal Candidate Eggman, Michael, ,			Date of Disbursement or Obligation		
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"> 67432.48 </div>			2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">67432.48</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">67432.48</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2016

Signature